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**CITY OF LONG BEACH**  
**DEPARTMENT OF PARKS & RECREATION**

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**Assistant Superintendent  
of Parks and Recreation**  
Paul Ferrante



# FABULOUS 4TH OF JULY RACE IN MEMORY OF SEAN RYAN

**1K CHILDREN'S FUN RUN – 8:00 a.m. ~ 4K Race – 8:30 a.m.**

## Monday, July 4, 2016



**REGISTRATION:** 1K Fun Run is \$10.00 for children 17 years of age and younger  
4K Early Registration \$25.00 before Saturday, July 2, 2016 at 12:00 p.m.  
4K Late Registration \$30.00 day of race from 6:30a.m. – 8:00 a.m.

**REGISTER ONLINE [WWW.RUNSIGNUP.COM](http://WWW.RUNSIGNUP.COM)**

**SEND ENTRIES TO:** Fabulous 4th 4K Race  
Long Beach Recreation Department  
700 Magnolia Boulevard  
Long Beach, NY 11561 (Payable to City of Long Beach)

**COURSE:** Accurately measured 4-K (2.49 miles), flat and fast course.  
Start & finish on the boardwalk at Laurelton Boulevard  
Race timing by Start To Finish Corporation \*No baby strollers allowed on race course.\*

**AWARDS:** Awards to the first four male & female winners in each age category: 14 & under, 15 – 19, 20 – 24, 25 – 29, 30 – 34, 35 – 39, 40 – 44, 45 – 49, 50 – 54, 55 – 59, 60 – 64, 65 – 69, 70 – 74, 75 – 79, 80+; first overall male & female; first Long Beach male & female; first in wheelchair division and top three finishers from the LB Police Dept.

**T-SHIRTS:** Will be given to registrants at number pick up on DAY OF RACE beginning at 6:30a.m. at Laurelton Boulevard while supplies last.

**GOD BLESS  
AMERICA**

**[WWW.LONGBEACHNY.GOV/REC](http://WWW.LONGBEACHNY.GOV/REC) or call 516-431-3890**

**2016 Fabulous 4<sup>th</sup> of July Race in Memory of Sean Ryan (Registration - please print clearly)**

In consideration of your accepting this entry, I, the undersigned, intending to be legally bound, hereby, for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against the Long Beach Parks and Recreation Department and the City of Long Beach their representatives, successors, and assigns for any and all injuries suffered by me in said event. I attest and verify that I am physically fit and have sufficiently trained for the completion of this run and my physical condition has been verified by a licensed medical doctor.

**PRINT NAME** \_\_\_\_\_ **M** \_\_\_\_\_ **F** \_\_\_\_\_ **1K** \_\_\_\_\_ **4K** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_ **TEL. #** \_\_\_\_\_

**AGE on 7/4** \_\_\_\_\_ **D.O.B.** \_\_\_\_\_ **LBPD** \_\_\_\_\_ **WHEELCHAIR** \_\_\_\_\_

**E-MAIL** \_\_\_\_\_ **SHIRT SIZE** (circle one) **S**, **M**, **L**, **XL**, **XXL** **YM** **YL**

**SIGNATURE** \_\_\_\_\_ **PARENT SIGNATURE** \_\_\_\_\_

(If under 17 years of age)

**FOR RECREATION DEPT. USE ONLY**

**RECEIPT #** \_\_\_\_\_ **AMOUNT PAID** \_\_\_\_\_ **DATE** \_\_\_\_\_ **STAFF** \_\_\_\_\_